## FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

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OMB AP	PROVAL
OMB Number:	3235-0076
Expires:	May 31 2005

Estimated average burden hours per response.....

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	PURSUANT TO REGULATION D,	Prefix	Serial
7072949	SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTIO	t i	ECEIVED
Name of Offering (☐ che USA Broadstone V	ck if this is an amendment and name has changed, and indicate change.) ista Ridge, DST		

USA Broadstone Vista Ridge, DST			
· _ · //_ —	Rule 505 Rule 50	6 Section 4(6)	ULOE
Type of Filing: New Filing Amendment			
	IDENTIFICATION DATA	100 300000	
Enter the information requested about the issuer		<u>ant 3 / 5007 /</u>	
Name of Issuer ( check if this is an amendment and name has c	hanged, and indicate change.)	The second second	1
USA Broadstone Vista Ridge, DST			
Address of Executive Offices (Number and Street, C	ty, State, Zip Code)	Telephone Number (Including Ar	rea Code)
Five Financial Plaza, Suite 105, Napa, CA 94558		(800) <b>9.11-,119</b> 0\	
Address of Principal Business Operations (Number and Street, C (if different from Executive Offices)	ty, State, Zip Code)	Telephone Number (Including Ar	ea Code)
			88888
Brief Description of Business			PROCESSED
The acquisition, management and sale of undivided tena	nt-in-common interests in rea		
			JUL 2 7 2007
Type of Business Organization			
☐ corporation ☐ limited partnership	•	other (please specify):	THOMSUN
· · · · · · · · · · · · · · · · · · ·	•	other (please specify):	JUL 27 2007 THOMSUN FINANCIAL
☐ corporation ☐ limited partnership ☐ limited partnership ☐ limited partnership	•	other (please specify):	THOMSUN
□ corporation       □ limited partnership         ⋈ business trust       □ limited partnership	, to be formed	□ other (please specify):  □ Actual □ Estimated	THOMSUN
□ corporation □ limited partnership □ business trust □ limited partnership  Actual or Estimated Date of Incorporation or Organization: □ 0  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S.)	, to be formed  Month Year  1 0 7	✓ Actual ☐ Estimated	THOMSUN

#### **GENERAL INSTRUCTIONS**

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: · Each promoter of the issuer, if the issuer has been organized within the past five years; • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer General and/or □ Director Managing Partner Full Name (Last name first, if individual) U.S. Advisor, LLC Business or Residence Address (Number and Street, City, State, Zip Code) Five Financial Plaza, Suite 105, Napa, CA 94558 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter General and/or ■ Beneficial Owner ☐ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ■ Beneficial Owner ☐ Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

											Yes	No
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2. Wha	at is the mir	iimum invo	estment tha	t will be a	ccepted fro	m any indi	vidual?			•••••	<b>\$</b> 100,0	00*
3. Doe	s the offeri	ng permit j	oint owner	ship of a si	ngle unit?			*************	·····		Yes ⊠	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
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<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												No ⊠
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3. Does	s the offeri	ng permit j	oint owner	ship of a si	ingle unit?.	•••••	••••••				Yes ⊠	No
com: offer and/	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)											
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 $<sup>\</sup>star A$  smaller amount may be accepted by the company, in its sole discretion.

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3. Does the offering permit joint ownership of a single unit?  4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  Sheehan, Scott  Business or Residence Address (Number and Street, City, State, Zip Code)  2 Orr Hatch Drive, Cornwall, NY 12518  Name of Associated Broker or Dealer  Investors Capitol Corp.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)		
3. Does the offering permit joint ownership of a single unit?		
3. Does the offering permit joint ownership of a single unit?  4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  Sheehan, Scott  Business or Residence Address (Number and Street, City, State, Zip Code)  2 Orr Hatch Drive, Cornwall, NY 12518  Name of Associated Broker or Dealer  Investors Capitol Corp.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)	100,000	+
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual) Sheehan, Scott  Business or Residence Address (Number and Street, City, State, Zip Code) 2 Orr Hatch Drive, Cornwall, NY 12518  Name of Associated Broker or Dealer Investors Capitol Corp.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Yes ⊠	No
Sheehan, Scott  Business or Residence Address (Number and Street, City, State, Zip Code) 2 Orr Hatch Drive, Cornwall, NY 12518  Name of Associated Broker or Dealer Investors Capitol Corp.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		
Business or Residence Address (Number and Street, City, State, Zip Code)  2 Orr Hatch Drive, Cornwall, NY 12518  Name of Associated Broker or Dealer Investors Capitol Corp.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		
2 Orr Hatch Drive, Cornwall, NY 12518  Name of Associated Broker or Dealer Investors Capitol Corp.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		
Investors Capitol Corp.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)		
(Check "All States" or check individual States)		
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Full Name (Last name first, if individual) DeMera, Gary  Business or Residence Address (Number and Street, City, State, Zip Code) 700 Airport Blvd., Suite 410, Burlingame, CA 94010  Name of Associated Broker or Dealer Sloan Securities Corp.	1S]    R]	[ID] [MO] [PA] [PR]
Name of Associated Broker or Dealer Sloan Securities Corp.		
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	-	[PR]
Full Name (Last name first, if individual)  Maund, Mark T.		
Business or Residence Address (Number and Street, City, State, Zip Code) 1776 Pleasant Plain Rd., Fairfield, IA 52556-8757		
Name of Associated Broker or Dealer		
Cambridge Investment Research, Inc.		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	☐ All Si	tates
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MN] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OH] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WI]	[S] [	[ID] [MO] [PA] [PR]

<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?  Yes No  3. Does the offering permit joint ownership of a single unit?  4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.
Yes No 3. Does the offering permit joint ownership of a single unit?
<ol> <li>Does the offering permit joint ownership of a single unit?</li> <li>Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are</li> </ol>
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commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are
Full Name (Last name first, if individual) Nicholson, Scott
Business or Residence Address (Number and Street, City, State, Zip Code) 1776 Pleasant Plain Rd., Fairfield, IA 52556-8757
Name of Associated Broker or Dealer
Cambridge Investment Research, Inc.
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [\overline{N}] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]
Full Name (Last name first, if individual) Alexander, Susan A.
Business or Residence Address (Number and Street, City, State, Zip Code) 5002 West Waters, Tampa, FL 33634
Name of Associated Broker or Dealer
GunnAllen Financial, Inc.
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)
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Full Name (Last name first, if individual) Rivas, Luis O.
Business or Residence Address (Number and Street, City, State, Zip Code) 558 B Street, Second Floor, Santa Rosa, CA 95401-5274
Name of Associated Broker or Dealer
GBS Financial Corp.
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)
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<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												No ⊠	
							n 2, if filin		_		. 🗆	_	
2. Wha	t is the min	imum inve	stment tha	t will be ac	cepted from	m any indi	vidual?	• • • • • • • • • • • • • • • • • • • •			. \$ 100,0	00*	
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commoffer and/o	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
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[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI]  Full Name (Last name first, if individual)  Manning, Ronald W.  Business or Residence Address (Number and Street, City, State, Zip Code)													
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<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											Yes	No ⊠
			Α	inswer also	in Append	lix, Colum	n 2, if filin	g under UI	OE.			
2. Wha	it is the mir	nimum inv	estment tha	t will be a	ccepted fro	m any indi	vidual?	***************************************	••••••		. \$ 100,0	*00
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4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
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<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												No ⊠
			Α	nswer also	in Append	lix, Colum	n 2, if filin	g under UL	OE.			
2. Wha	t is the mir	iimum inve	estment tha	t will be ac	ecepted from	m any indi	vidual?		•••••••		. <u>\$ 100,0</u>	00*
3. Does	s the offerit	ng permit j	oint owners	ship of a si	ngle unit?.	***************************************		************			Yes . ⊠	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
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Full Name (Last name first, if individual) English, Tom D.												
	ss or Reside 20 Corners		-			•	•					
	of Associate P Securit		or Dealer								•	
	n Which Pe eck "All St											
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	ss or Reside		•		t, City, Sta	te, Zip Co	ie)			,,,,		
	f Associate								<del></del>			
Cap	pital Finan	icial Servi	ices, Inc.									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)											I States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
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[RI]	[SC] ————	[SD]	[TN]	[TX]	[UT] 	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No ⊠
Answer also in Appendix, Column 2, if filing under ULOE.		
2. What is the minimum investment that will be accepted from any individual?	\$ 100,0	00*
3. Does the offering permit joint ownership of a single unit?	Yes . ⊠	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full Name (Last name first, if individual) Schryer, Alan J.		
Business or Residence Address (Number and Street, City, State, Zip Code) 10 Universal City Plaza, 20th Floor, Universal City, CA 91608		
Name of Associated Broker or Dealer Empire Securities Corporation		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		1 States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name (Last name first, if individual) Hausman, Robert C.		
Business or Residence Address (Number and Street, City, State, Zip Code) 2001 Sixth Ave, Suite 2801, Seattle, WA 98121-1866	<u></u>	
Name of Associated Broker or Dealer KMS Financial Services, Inc.		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	🗆 AI	l States
[AL]       [AK]       [AZ]       [AR]       [CA]       [CO]       [CT]       [DE]       [DC]       [FL]       [GA]         [IL]       [IN]       [IA]       [KS]       [KY]       [LA]       [ME]       [MD]       [MA]       [MI]       [MN]         [MT]       [NE]       [NV]       [NH]       [NJ]       [NM]       [NY]       [NC]       [ND]       [OH]       [OK]         [RI]       [SC]       [SD]       [TN]       [TX]       [UT]       [VT]       [VA]       [WA]       [WV]       [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name (Last name first, if individual) Birch, Thomas J.		
Business or Residence Address (Number and Street, City, State, Zip Code) 336 Fourth Avenue, Pittsburgh, PA 15222-2004		
Name of Associated Broker or Dealer Mid Atlantic Capital Corporation		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	🗌 Al	l States
[AL]       [AK]       [AZ]       [AR]       [CA]       [CO]       [CT]       [DE]       [DC]       [FL]       [GA]         [IL]       [IN]       [IA]       [KS]       [KY]       [LA]       [ME]       [MD]       [MA]       [MI]       [MN]         [MT]       [NE]       [NV]       [NH]       [NV]       [NM]       [NY]       [NC]       [ND]       [OH]       [OK]         [RI]       [SC]       [SD]       [TN]       [TX]       [UT]       [VT]       [VA]       [WA]       [WV]       [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.												No ⊠
			A	nswer also	in Append	lix, Colum	n 2, if filing	g under UL	OE.			
2. What	t is the min	imum inve	stment tha	t will be ac	cepted from	m any indi	vidual?	••••••			. \$ 100,0	00*
											Yes	No
3. Does	the offerir	ng permit je	oint owner:	ship of a si	ngle unit?.	*************		• • • • • • • • • • • • • • • • • • • •		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	🛛	
comr offer and/o	r the inform mission or a ing. If a pear or with a sta ciated perso	similar ren erson to be ate or state	nuneration listed is ar s, list the n	for solicita associated ame of the	tion of pure I person or broker or e	chasers in a agent of a dealer. If n	connection broker or c nore than fi	with sales lealer regis ve (5) pers	of securitie tered with ons to be li	the SEC sted are		
	me (Last na eders, Cra		findividua	1)								
	s or Reside					te, Zip Coo	le)					
	xecutive I			rt Lee, N.	07024							<u>.                                    </u>
	f Associate an Securitie		r Dealer									
			d Has Solic	ited or Inte	ends to Sol	icit Purcha	sers		. <u>.</u>			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												l States
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[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
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	s or Reside		ss (Numbe	r and Stree	t, City, Sta	te, Zip Coo	de)					<del>.</del>
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[IL]	[IN]	[IA]	[KS]	[KY]	[LA]		[MD]	[MA]		[MN]	[MS]	[MO]
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Full Na	me (Last natz, Ray D.	ame first, i										
Busines	s or Reside	nce Addre	•		•	ite, Zip Co	de)					
Name o	f Associate	d Broker o	or Dealer	.*		······································						
States in	n Which Pe	rson Liste	d Has Solid						***************************************		🗀 Al	1 States
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[MT] [RI]	[NE] [SC]	[NV] (SD)	[NH] [TN]	[NJ] [TX]	[NM] {UT}	[NY] [VT]	[NC] {VA}	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA]
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<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	ì 🔯
Answer also in Appendix, Column 2, if filing under ULOE.	_
2. What is the minimum investment that will be accepted from any individual?	*000,000
Y	
3. Does the offering permit joint ownership of a single unit?	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.	
Full Name (Last name first, if individual) Hanson, James	
Business or Residence Address (Number and Street, City, State, Zip Code) 1869 West Littleton Blvd., Littleton, CO 80120	
Name of Associated Broker or Dealer	· · ·
MCL Financinal Group, Inc.	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)	All States
[AL]       [AK]       [AZ]       [AR]       [CA]       [CO]       [CT]       [DE]       [DC]       [FL]       [GA]       [HI]         [IL]       [IN]       [IA]       [KS]       [KY]       [LA]       [ME]       [MD]       [MA]       [MI]       [MN]       [MS]         [MT]       [NE]       [NV]       [NH]       [NJ]       [NM]       [NY]       [NC]       [ND]       [OH]       [OK]       [OR]         [RI]       [SC]       [SD]       [TN]       [TX]       [UT]       [VT]       [VA]       [WA]       [WV]       [WI]       [WY]	[PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]  Full Name (Last name first, if individual)  Riner, James	[PR] 
Business or Residence Address (Number and Street, City, State, Zip Code) 725 Town & Country Road, Suite 530, Orange, CA 92868	
Name of Associated Broker or Dealer	
Crown Capital Securities, L.P.	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)	All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY	
Full Name (Last name first, if individual) Nifong, David B.	
Business or Residence Address (Number and Street, City, State, Zip Code) 200 South College Street, 21st Floor, Charlotte, NC 28202	
Name of Associated Broker or Dealer	
Uvest Financial Services Group, Inc.	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR	
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	

<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

l. Has	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											No ⊠
			A	inswer also	in Append	dix, Colum	n 2, if filin	g under UL	OE.			
2. Wha	t is the mir	ıimum inv	estment tha	it will be ac	ccepted fro	m any indi	vidual?				. <u>\$ 100,0</u>	00*
3. Does	s the offeri	ng permit j	oint owner	ship of a si	ingle unit?		***********	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes . ⊠	No □
comi offer and/e	mission or ring. If a p or with a st	similar ren erson to be tate or state	uested for e nuneration listed is and es, list the r n a broker of	for solicita associated ame of the	tion of pur d person or broker or	chasers in agent of a dealer. If n	connection broker or c nore than fi	with sales dealer regis ve (5) pers	of securition tered with ons to be li	the SEC sted are		
	me (Last n slin, Chris		f individua	1)								
Busines	s or Reside	ence Addre	ess (Numbe		et, City, Sta	te, Zip Co	de)		•			
	f Associate					<del></del>						1 81
Gui	nnAllen F	inancial,	Inc.									
			d Has Solid eck individ								🔲 Al	l States
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Name o	f Associate	ed Broker o	or Dealer	Jan Diege	5, CA 72.						·	
	dison Aven					<del> </del>						
			d Has Solid eck individ								🔲 AI	1 States
(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] (PR]
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Busines	s or Reside	ence Addre	ess (Numbe			-	•	2				
Name o	f Associate	ed Broker o	or Dealer	<del></del>	. , -						•	
			roup, LLC									
			d Has Solid eck individ							•••••	🔲 Al	1 States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												No ⊠
3. Does the offering permit joint ownership of a single unit?				At	nswer also	in Append	ix, Columi	n 2, if filing	g under UL	OE.			
3. Does the offering permit joint ownership of a single unit?	2. What is the	the minir	num inves	tment that	will be ac	cepted from	n any indiv	vidual?		••••••		<u>\$ 100,0</u>	00*
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  Ivanick, Robert M.  Business or Residence Address (Number and Street, City, State, Zip Code)  725 Town & Country Road, Suite 530, Orange, CA 92868  Name of Associated Broker or Dealer  Crown Capital Securities, L.P.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)													No
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual) Ivanick, Robert M.  Business or Residence Address (Number and Street, City, State, Zip Code) 725 Town & Country Road, Suite 530, Orange, CA 92868  Name of Associated Broker or Dealer Crown Capital Securities, L.P.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	3. Does the	offering	permit jo	int owners	hip of a sir	ngle unit?		*************		******************	*****************	. 🛛	
Ivanick, Robert M.  Business or Residence Address (Number and Street, City, State, Zip Code) 725 Town & Country Road, Suite 530, Orange, CA 92868  Name of Associated Broker or Dealer Crown Capital Securities, L.P.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	commissi offering. and/or wi	ion or si If a per ith a stat	milar remu son to be l e or states	uneration f listed is an , list the na	or solicitat associated ame of the	ion of pure person or broker or c	chasers in o agent of a lealer. If m	connection broker or coore than fi	with sales lealer regis ve (5) pers	of securition tered with ons to be li	s in the the SEC sted are		
Business or Residence Address (Number and Street, City, State, Zip Code) 725 Town & Country Road, Suite 530, Orange, CA 92868  Name of Associated Broker or Dealer Crown Capital Securities, L.P.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)				individual	)							•	
Name of Associated Broker or Dealer Crown Capital Securities, L.P.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	<del></del>			- Ol		Cit. Ct.	7' 0						
Name of Associated Broker or Dealer Crown Capital Securities, L.P.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)								le)					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)					2 2 2 0 , 0 10	ange, or i	72000						····
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Radford, Michael R.  Business or Residence Address (Number and Street, City, State, Zip Code) 275 East Hillcrest Drive, Suite 255, Thousand Oaks, CA 91360-8241  Name of Associated Broker or Dealer Madison Avenue Securities, Inc.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Crown	Capital	Securitie	s, L.P.									
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Radford, Michael R.  Business or Residence Address (Number and Street, City, State, Zip Code) 275 East Hillcrest Drive, Suite 255, Thousand Oaks, CA 91360-8241  Name of Associated Broker or Dealer Madison Avenue Securities, Inc.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)													l States
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [NT] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] [WY] [PR] [WY] [PR] [WY] [WY] [WY] [WY] [WY] [WY] [WY] [WY												_	
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]  Full Name (Last name first, if individual) Radford, Michael R.  Business or Residence Address (Number and Street, City, State, Zip Code) 275 East Hillcrest Drive, Suite 255, Thousand Oaks, CA 91360-8241  Name of Associated Broker or Dealer Madison Avenue Securities, Inc.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		_	[IA]	[KS]			_						
Full Name (Last name first, if individual) Radford, Michael R.  Business or Residence Address (Number and Street, City, State, Zip Code) 275 East Hillcrest Drive, Suite 255, Thousand Oaks, CA 91360-8241  Name of Associated Broker or Dealer Madison Avenue Securities, Inc.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)											[OK]	[OR]	[PA]
Radford, Michael R.  Business or Residence Address (Number and Street, City, State, Zip Code) 275 East Hillcrest Drive, Suite 255, Thousand Oaks, CA 91360-8241  Name of Associated Broker or Dealer Madison Avenue Securities, Inc.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	[RI] [S	SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
275 East Hillcrest Drive, Suite 255, Thousand Oaks, CA 91360-8241  Name of Associated Broker or Dealer Madison Avenue Securities, Inc.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)				individual) 	)								
Name of Associated Broker or Dealer Madison Avenue Securities, Inc.  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)							-						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)					, , , , , , ,	and Guns,	011 715	00 02 11					
(Check "All States" or check individual States)	Madison	n Avenue	e Securitie	s, Inc.									
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Full Name (Last name first, if individual)				individual)	)								
Tehan, Timothy R.			·	21 1	1.0		~. ~				<del></del>		
Business or Residence Address (Number and Street, City, State, Zip Code) 5185 Peachtree Parkway, Suite 280, Norcross, GA 30092								le)					
Name of Associated Broker or Dealer		_			-	033, 071	70072		·				<del></del>
Triad Advisors, Inc.													
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<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

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<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												No ⊠
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<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

l. Has	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											No ⊠
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2. Wha	it is the mir	nimum inv	estment tha	nt will be a	ccepted fro	m any indi	vidual?			****************	. \$ 100,0	00*
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<sup>\*</sup>A smaller amount may be accepted by the company, in its sole discretion.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
<ol> <li>Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box          ☐ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged</li> </ol>	, , , , ,	
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ 0	\$ 0
Equity	\$ 0	\$ 0
☐ Common ☐ Preferred		
Convertible Securities (including warrants)	<b>\$</b> 0	\$ 0
Partnership Interests	\$ 0	\$ 0
Other (Specify Individual beneficial interests in the Delaware Statutory Trust)	\$15,000,000.00	\$15,000,000.00
Total	\$15,000,000.00	\$15,000,000.00
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
	Number Investors	Dollar Amount of Purchases
Accredited Investors	63	\$15,000,000.00
Non-accredited Investors	0	\$ 0
Total (for filings under Rule 504 only)		<b>\$</b>
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		<u>\$</u>
Regulation A		\$
Rule 504		\$
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	🛛	\$ 0
Printing and Engraving Costs	🛛	\$ 0
Legal Fees	🛛	\$525,295
Accounting Fees.	🗵	\$ 0
Engineering Fees	🛮	\$ 0
Sales Commission (specify finders' fees separately)	🛮	\$1,050,000
Other Expenses (identify)	🛛	\$ 0
Total	M	\$1 575 205

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted \$13,424.705 gross proceeds to the issuer." 5. Indicate below the amount of the adjusted proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers. **Payments** Directors To & Affiliates Others Salaries and fees ...... **⊠** \$0 Purchase of real estate ...... **№** \$10,785,000 **⊠ \$**0 **⊠ \$**0 Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer **⊠** \$0 Repayment of indebtedness..... **⊠** 50 **⊠ \$**0 Working capital ...... \$1.156.000 Other (specify): Real Estate Acquisition Expenses \$1.052,500 Column Totals S \$1,052,500 Total Payments Listed (column totals added)..... \$13,424,705 D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Signature 7/23/07 USA Broadstone Vista Ridge, DST Title of Signer (Print or Type) Name of Signer (Print or Type) Executive Vice President and General Counsel, U.S. Advisor, LLC, as a Trustee of USA James Berg Broadstone Vista Ridge, DST

## -ATTENTION---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE		
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No
See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)		ate
USA Broadstone Vista Ridge, DST	James J. Berg	7/23/07
Name (Print or Type)	Title (Print or Type)	
James Berg	Executive Vice President and General Counsel, U.S. Adv Broadstone Vista Ridge, DST	risor, LLC, as a Trustee of USA

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

ı		2	3			4		T	5	
	Intend to non-a investors (Part B	ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pur	investor and rchased in State C-Item 2)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Yes	No			
AL							· · · · · · · · · · · · · · · · · · ·			
AK										
AZ							1-1			
AR										
CA		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	19	\$4,821,788.65	0	N/A		Ø	
со		×	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	2	\$183,120.00	0	N/A		⊠	
СТ										
DE										
DC										
FL		×	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	4	\$2,169,199.35	0	N/A		Ø	
GA			Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	4	\$923,796.42	0	N/A		Ø	
НІ							7.00			
ID		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	1	\$1,041,689.48	0	N/A		Ø	
IL										
IN										
IA										
KS		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	2	\$274,350.00	0	N/A			
KY										
LA										
ME										

## APPENDIX

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1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MD		×	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	1	\$173,758.68	0	N/A		×
МА		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	1	\$340,000.00	0	N/A		×
MI									
MN									
MS		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	1	\$100,000.00	0	N/A		⊠
МО			Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	1	\$100,000.00	0	N/A		Ø
МТ					:				
NE									
NV									
NH									
NJ		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	1	\$129,000.00	0	N/A		⊠
NM									
NY		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	2	\$250,000.00	0	N/A		Ø
NC		×	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	8	\$1,930,916.44	0	N/A		Ø
ND		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	1	\$102,065.98	0	N/A		×
ОН									
ок			-				·		
OR		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	3	\$400,000.00	0	N/A		⊠

### APPENDIX

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		3 Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
PA		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	1	\$200,000.00	0	N/A		⊠	
RI										
SC		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	2	\$623,387.29	0	N/A		☒	
SD							1			
TN		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	1	\$100,000.00	0	N/A		⊠	
тх		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	1	\$25,000.00	0	N/A	o.	⊠	
UT										
VT			****					Q		
VA		×	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	3	\$317,843.46	0	N/A		⊠	
WA		⊠	Beneficial interests in the Delaware Statutory Trust- \$15,000,000.00	4	\$794,084.25	0	N/A		Ø	
wv										
WI										
WY										
PR										

# **END**